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## JUN 29 2006

PTO/SB/83 (01-08)
Approved for use through 12/31/2008, OMB 0851-0035
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REQUEST FOR WITHDRAWAL
AS ATTORNEY OR AGENT
AND CHANGE OF
CORRESPONDENCE ADDRESS

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Application Number	10/542,616	
Filing Date	July 18, 2005	
First Named Inventor	Aastrup	
Art Unit		
Examiner Name		
Attorney Docket Number	70407-79785	

To: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450  Please withdraw mass attorney or agent for the above identified patent application, and— all the attorneys/agents of record.  the attorneys/agents (with registration numbers) listed on the attached paper(s), or the attorneys/agents associated with Customer Number  NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.  The reasons for this request are: Leaving the employ of Customer No. 28288  CORRESPONDENCE ADDRESS  1.   The correspondence address is NOT affected by this withdrawal. 2.  Change the correspondence address and direct all future correspondence to:  The address associated with Customer Number:
all the attorneys/agents of record.  the attorneys/agents (with registration numbers) listed on the attached paper(s), or  the attorneys/agents associated with Customer Number  NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.  The reasons for this request are: Leaving the employ of Customer No. 28288  CORRESPONDENCE ADDRESS  1. The correspondence address is NOT affected by this withdrawal.  2. Change the correspondence address and direct all future correspondence to:  The address associated with Customer Number:
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the attorneys/agents associated with Customer Number  NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.  The reasons for this request are: Leaving the employ of Customer No. 28288  CORRESPONDENCE ADDRESS  1.  The correspondence address is NOT affected by this withdrawal.  Change the correspondence address and direct all future correspondence to:  The address associated with Customer Number:
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Date June 28, 2008 Telephone No.
NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including genering, propering, and submilling the completed application from to the USPTO. Time will vary depending upon the individual case. Any comments on the emount of time you require to complete this form analysis and reducing this burden, should be sent to the Chief Information Officer, U.S. Patient and Tredering (Pilos, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1460. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandria, VA 22313-1460.

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